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	SDNY PRO SE OFFICE
UNITED STATES DISTRICT COURT	2015 100
SOUTHERN DISTRICT OF NEW YORK	2015 APR 10 A 11: 39
BOBERT A. COZZILL AZZO DLOGUL	
SOUR FIN WILLIAM SHT FOR THERENCY	SECOND
(In the space above enter the full name(s) of the plaintiff(s)?	** AMENDED
(in the space door one the jun name(s) of the planning(s))	COMPLAINT
-against-	under the Civil Rights Act,
-agamst-	42 U.S.C. § 1983
1. BRIAN FISCHER, COMMISSIONIER.	.2 6.6.6. 3 1566
DEPARTABLE OF CORRECTIONS AND	D
CANARYUTE SOMERIUSIONS	Jury Trial: Yes  No
2 Mazage (Atriant) 325 ital siches	
TEMPENT GREEN HAVEN COPPER.	
TICHERALASAMOIT	Civ ( )
3 THE CITY OF LEW YORD	-
4 JOSENS HOSPITAS CENTER CLESCOLOP	(0322) NTT & E
(In the space above enter the full name(s) of the defendant(s). If you	,
cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an	
additional sheet of paper with the full list of names. The names	
listed in the above caption must be identical to those contained in	en e
Part I. Addresses should not be included here.)	JSDC SDNY
D. C.	DOCUMENT
1. Parties in this complaint:	LECTRONICALLY FILED -
A. List your name, identification number, and the name and	OC# 4/973013
confinement. Do the same for any additional plaintiffs named	
as necessary.	Treated additional shoots of paper—
**************************************	
Plaintiff's Name BOSERT A. COZ 2010	
ID# CVACSCO	
Current Institution SIREZ-U HAVELO CI	CLONT SANCOTOSPAPO
Address POST OFFICE BOW A	000
SICRMICE SOEM MERCH LOBB 15	285-4000
B. List all defendants' names, positions, places of employment, ar	nd the addragg where each defendant
may be served. Make sure that the defendant(s) listed below as	
above caption. Attach additional sheets of paper as necessary	
, and the supplier of the supp	•
Ca, Ca	MITIZEIGNUER - PACCE
Defendant No. 1 Name BRIAN FILLER	Shield # 11 www
Where Currently Employed	F NEW YORG
Address CSO WASHINGTO	me Avenus (
AZ BALLY MELLE POL	2,5551 218
	(-)

## Case 7:15-cv-00103-KMK Document 11 Filed 04/09/15 Page 2 of 24 Case 1:15-cv-00103-LAP Filed 03/17/15 Document 10 Defendant No. 2 Where Currently Employed Address \ Defendant No. 3 Where Currently Employed Address \_ Who did CENTER Shield #\_\_\_\_ what? Defendant No. 4 Defendant No. 5 Where Currently Employed II. Statement of Claim: State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary. In what institution did the events giving rise to your claim(s) occur? Α. (032)9XTTA В. Where in the institution did the events giving rise to your claim(s) occur? C. What date and approximate time did the events giving rise to your claim(s) occur? D. What happened to you?

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	<u> </u>
W as anyone	
else involved?	
Who else saw what	
happened?	III. Injuries:
	If you sustained injuries related to the events alleged above, describe them and state what medical
	treatment, if any, you required and received.
	(CO3H)2ATTA 33L/
	IV. Exhaustion of Administrative Remedies:
	The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.
	A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Vas No DEO ALCOLO

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(03H)2XTA 33L
Does the jail, prison or other correctional facility where your claim(s) arose have a grievar procedure?
Yes No Do Not Know
Does the grievance procedure at the jail, prison or other correctional facility where your claim arose cover some or all of your claim(s)?
Yes No Do Not Know
If YES, which claim(s)?
Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) aros
Yes No If NO, did you file a grievance about the events described in this complaint at any other japrison, or other correctional facility?
Yes No
Yes No  If you did file a grievance, about the events described in this complaint, where did you file grievance?  CREEN LANCEU CORRECTIONAL TABLESTON
If you did file a grievance, about the events described in this complaint, where did you file
If you did file a grievance, about the events described in this complaint, where did you file a grievance?  1. Which claim(s) in this complaint did you grieve?
If you did file a grievance, about the events described in this complaint, where did you file grievance?  1. Which claim(s) in this complaint did you grieve?  2. What was the result, If any?  2. What was the result, If any?  3. Consection Office.  3. Consection Office.  3. Consection Office.
If you did file a grievance, about the events described in this complaint, where did you file grievance?  1. Which claim(s) in this complaint did you grieve?  2. What was the result, If any?  Congression Office of Congre
If you did file a grievance, about the events described in this complaint, where did you file grievance?  1. Which claim(s) in this complaint did you grieve?  2. What was the result, if any?  3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal the highest level of the grievance process.
If you did file a grievance, about the events described in this complaint, where did you file grievance?  1. Which claim(s) in this complaint did you grieve?  2. What was the result, if any?  3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal the highest level of the grievance process.

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	2.	If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any:
		- WA
	`	
G.	Please remedi	set forth any additional information that is relevant to the exhaustion of your administrative
	k	4 Mone.
<u>Note</u> :	You m	ay attach as exhibits to this complaint any documents related to the exhaustion of your strative remedies.
v.	Relief:	
State w	hat you e seeking	want the Court to do for you (including the amount of monetary compensation, if any, that and the basis for such amount).
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	VI.	Previous lawsuits:
1	A.	
On these	Α.	Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?
claims	,	Yes V No BOT TUBGLEGO WITH PLOND TEGLOT TO SOME OF
	B.	If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)
		1. Parties to the previous lawsuit:
		Plaintiff ROBERT & COSSING CIASSOS Defendants BRIAN FIRMER WILLIAM WEE UPSONIN
		2 Court (if federal court, name the district; if state court, name the county) (Elky YOR)
		_3. Docket or Index number 2041/13.
	***	_4. Name of Judge assigned to your case HOW MARIA Co Roll
		5. Approximate date of filing lawsuit SALONABY 2012.
		6. Is the case still pending? Yes No
		If NO, give the approximate date of disposition
		What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) 3000 1000 1000 1000 1000 1000 1000 100
<del></del>	C.	Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?
On other claims	C.	Yes No
	D.	If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)
		1. Parties to the previous lawsuit:
		Plaintiff (2EE ATTACHED), Defendants
		2. Court (if federal court, name the district; if state court, name the county)
		3. Docket or Index number
		4. Name of Judge assigned to your case
		5. Approximate date of filing lawsuit
		11

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6.	Is the case still pending? Yes No
	If NO, give the approximate date of disposition
7.	What was the result of the case? (For example: Was the case dismissed? Was ther judgment in your favor? Was the case appealed?)
l declare un	er penalty of perjury that the foregoing is true and correct.
Signed this <b>2</b>	day of APRIL , 2015,
	Signature of Plaintiff Robort Carabbaria
	Inmate Number — OIA6500
	Institution Address  GREEN FILE CT
	STORIOUZIZE, M. Y.
	- 1000x-38651
Note: All p their	aintiffs named in the caption of the complaint must date and sign the complaint and provid nmate numbers and addresses.
declare und	er penalty of perjury that on this 380 day of APRIL, 2015 I am delivering
his complain	to prison authorities to be mailed to the Pro Se Office of the United States District Court fo
he Southern	District of New York.
	Signature of Plaintiff: Robert Callers

LS-CV-0103 (ZAP) SECOND AMENDED CONTONIA -ACAINST-(CONTÓ), SI ZONO ISLAND UENCIÁN HOSPITAZ C. EUCHER HISLAIDE HOSPITAZ E FEUSHING HOSPITAL MEDICAL CENTER

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Case 7:15-cv-00103-KMK Document 11 Filed 04/09/15 Page 10 of 24 SECOND ANEMOED COMPLAINT

CASSENTENT OF CONFEDENT OF RESIDENT STATES ON TROUBSDAY MOYENBOY & BOLLY I WAS MALTE THE ON SING IN BAND COORBIDOR, COREEN HAVEN CORRECTIONAL FACILITY) TO BE ESCORTED TO Builbing Trassus son 47 Bla rocktioner CIASS OF COUPLIER BEPLIE, THIS TOZO BY A CORREC-332 OT TOOLSAD & CAN I THAT ENSONED MOIT MIT MORIAS, ONE OF THE THERAPLETS WORDING IN 130 20 20 20 THE SIGER FLOW TOWN COURSE HOUSES GREEN HAVEN CORPECTIONAL FACILITY S BOMATRIC SERVICES UNITA Agains in Brinouis Two, I was stopped - DAJ 283217 ONOTOBRADI SAT YO RENTOLD YN PO KIDINO JEENBITY THERE, MYSTHEN CONTINED MICHE OF THE CELLS, (BEFERRED TO AS TAILS), IN THOSE CELLS, THERE KAE BARIGHET FELLORESCELLT ELGINTS THAT ABE GEPT GUT THENTY-POUR HOURS A RAY. A SAN OT LEATING OF CLEWY, 0309107 RAN ] EASH I, ETHAT L'ORISSIVITIN CLETCHT FANT DIOYLE HADE TO EAT HE HEARS MITHOUT MIS TOPE OF CAN L COM RESIDED EASK II EX LISENEST CONTRES MO CROTHES, IT WILL KEBY CORD IN THE CELLE DESONER WITH PURT BUT IN JUST EAN ! of sois and then at 05:00 X W. In the MOBNING TRANSFERGED TO DOWNSTATE CORRECTION FACILITY LO CLOTHES LUCK HAD BEEK GETOBLED TO HE FOR THE TRIP TO DOMINATATE FROM GREENSHWENG WEBE XCAM TAISEN MED L'ACAS CONTINED IN CEUZ SEIGNIEGU OF DOGUSTATE I D-BROCK

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SEROMO LYEMDED COMPLAINT

25 (contib), 15-CY-0103(CAP) IT , STATEHELD OF CENTY On MONDAY, NOVENBERS, 2018, I WAS SEEN BY Y BEAGHINELDIST AND SOCIAR MOBILED AT BOMMETALE CORRECTIONAR FACILITY, AT THE END OF THE WITCH VIEW OT GENRICTER ERBY LEANTONS FT WENT ON TUESDAY, MOVENDERS & 2015 I WAS AGAILLINE-LERVIEWED BY A PSPCHIATRIST NAVED ESPIBITOS. JUEST MESURESOM SKOREMOREN THERE ONTRODUCAS, LOVENDED & SCIE, I MAS BETURNED TO GREEN HAVEN CORRECTIONAL FACILITY AND SELT TO MESSE IN A-13500 & COAD3-310), CLATER THAT DAY WAS ABAIN SUNTYOUTED TO THE PROGRAMBIO SERVICES Duit in GREEK HAVELLE BURBING TROCTERS TOLD BY A BEYCHILD BEEN OUTSURE THAT SUCK LIKED BEEN OUTSURE THE METITION AND PETUBLED I HAD TO DINDERSO A PERIOD OF OBSERICATION AND MEDICATION CONPENANCE ON THIS OCCASION, [ WAS CONTINED IN A FORG-BED ABBNIDENET, THAT IS BETERRED TO AS THE 132GHINTAIN 3830 CINAPLED I SECTIFICA JULY 230129832 OBSPANJA SON I HAND JOSS, Z RECHENON SITHS TO MY BECELLAR CELL MARSECA, CAOS 310) ON DECEMBER Z 2018, I WAS LEAVE TABLER TO EMENAH MEERD IN TIME ESMEREZ SIGTAMOYS BATE Buisnice That these contines in Takes CEERS THO I WAS AESELYSED ON MONDAY, DECENTISER IC. 2012, LUD BETURILED TO HY CEED, (SID) WILL-BEDCH & THREE COMPANY ON DECEMBER 18, 2012, I WAS BEEPLESSON WO GIVELLA TIER ITT MITRACTION BY A CORPECTION

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210, CONT'S), 15-CN-0103(2AP) IT, STATEHELT OF CEVING OFFICED WHO WORDS PRIMARIES THE CZ:00 HOUR TO if BH OWN ENBYSTE IS STANGUE EIN, AUDT AUDHO 15 REGULARIOS ESPAT, LASOSA - AS CIPPARTE CONPANOS ON DECEMBER 21, 2012, I APPEARED IT A BERFUED AND EAN PRODUCTED BURESH BIT, MOTTER PARTURED POR BEREARCH THE CHATCHEST FICER FICERS THEIRS IN 3HT OF Q3TSIVED TON Q359 I SSI3H'D BONSANAS FRACTICINES EXERCISED AGAINST HE BY COBBECTION ORFICEBSTENENS. STER, THE HEARING, THE ESCORT OFFICER, CORREC-TION OFFICER MARTIN TOOK HE BACKTO THE PROCES ATRIC SEBUCIOE DIVIT, I WAS CONTINED IN TAMIS TWO CBUTHODENATIENCE JOBE CHAS CONTINED IN THE PROGRAMME SERVICES DINTE DOBINIOGY, BED ONE), I WAS THEN ABAIL PRAIR DINA TAMY, (THISE TOP) 3103/E P3EP1320 NO 925 NUT LYND 33PHT YSSGINS I KIND BESSEASED TO CESS 319 ON A BROCKS THREE SOJOSGJA ISTREDUT, PURGNOS OLODES MESSAT LAND L'EWS L'EDAY L'EDAY L'EDAS TABERC BACG TO THE PRYCHIATRIC SERVICE DUIT, I WAS BEZEASZE EIOS , ESPACIANT, PROIDENO IN DECEMBER 2012, ITIED A GRIEVANCE FOR ENBASIZ BESSIFFO NOTCESPEND TENNESA TENSHELLANI IT IS TO THIS CRIBICALICE AND THE ABOUT DETAILED CONTINENTS IN GREEN FAVERIL PERCHATRIC SERin sousse I How or out suicesies un sing 301x 174 COMPRAINTS AGAINIST COMMISSIONER FISCHER AND KULLULANT EEE.

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Defendent Number Wine 200

SECOND AMENDED COMPENING

Zucker Hillside Hospital 75-59 263rd Street Glen Oaks, New York 11004

Defendent Number Ten SEVEN

Flushing Hospital Medical Center 45 45th Avenue Flushing, New York 11356

Colondont Number Blevel Church

Creedmoore Psychiatric Center 79-25 Winchester Boulevard Queens Village, New York 11427

II. Statement of Claim

State as briefly as possible the facts of your case. Describe how each of the defendents named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further detaips such as the names of other persons involved in the events giving rise to your claims. Do not give any legal arguments of cite any cases or statutes. If you intend to allege a number of related claims, number and set fort/h each claim in a separate paragraph. Atta/ch additional sheets of paper as necessary.

- A. In what institution did the events of ng rise to your claim(s)
- B. Where in the institution did the events giving rise to your claim(s) occur?
- C. What date and approximate time did the events giving rise to your cliam(s) occur?

#### Facts

- a. What happened to you?
- b. Who did what?
- C. Was anyone else involved?
- d. Who else saw what happened?
- 1. Brian Fischer, Commissioner, New York State Department of Correction and Connunity Supervision.
- A. Green Haven Correctional Facility GRUSICED CORRECTION
  OFFICER STENENS

- II. Statement of Claim (cont'd). SECOND ANENDED CONPLAINT
- B. 0A Block-03 Company-310 Cell Green Haven Correctional Facility's Psychiatric Service Unit, Building Two.
- C. September 2012 to January 2013.
- D. Commissioner Brian Fischer alleges that he was not appealed to, despite me having had my Aunt, (Ms. Evelyn L. Fray), wirte him and apprise him of my grievance against Correction Officer Stevens. (Exhibit) My Appril 25 WALL CONTROL OF ADMINISTRACE REMEDIATION OF ADMINISTRACE REMEDIATION OF ADMINISTRACE REMEDIATION OF THE ADMINISTRACE REMEDIATION
- A. Green Haven Correctional Facility
- B. Green Haven Correctional Facility's Psychiatric Services Unit, Building Two
- C. Movember 2012, 02:00 A.M.
- D. I was transferred to Downstate Correctional Facility from Green Haven Correctional Facility at the above time. (See Article 79). Mr. William Lee, (Kopmer) Superintendent Green Haven Correctinal Facility, toured the Psychiatric Unit's 'dormitory' and 'tank' areas routinely, and was fully cognizant of the inhumane measures employed by the Office of Mental Health operating in conjunction with the Department of Correction and Community Supervision.

3. New York State Office of Mental Health

A. Green Haven Correctional FAcility

B. Green Haven Correctional FActlity's Psychiatric Service Unit, Building Two.

C. September 2012-January 2013.

3. THE CITY OF MEN PORT A HOLLE POPER.

- A. Family residence, (178-06 119th Road, Jamaica, New York 11434).
- B. Neighborhood in vicinity of family residence.
- c. July 1998-April 27, 1999.
- D. ON numerous occasions, after I returned to my family residence

II. Statement of Claim (cont'd), SECOND ANENDED CONPLANT

From an Adult Care Facility named Seaport Manor, (Canarsie, Brooklyn, New York), where I had been living from January of 1996 to July of 1998, I was stopped by the police, for no apparent reason. No one else was involved, because invariably these incidents occurred when I was alone. On several occasions I was made to surrender my identification. My driver's licence was run through the computer in a police car. There should be a record of this in my neighborhood's pracinct, the 113th.

3 Ar Are: Derek or "Dermick" Storey)

- A. Family residence.
- B. Inside above residence.
- C. April 27, 1999.
- D. Unlawful invasion of faimily residence by above named Police Officer.

# 3 Fourkil 113th Precinct

- A. Neighborhood of Jamaica, Quaens, New York.
- B. Street, (119th Road), right outside of family residence.
- C. January 28, 1999.
- D. Unprovoked attack by them Police Officer, now Sergeant Tacco.
- 4 %. Queens Hospital Center.
  - A. Queens Hoxpital Center.
  - B. Psychiatric section of Emergency room/
  - C. March 4, 1999.
  - D. ON the above date, I was taken to this hospital, after naving been taken from my family residence. The Police unlawfully confiscated picture identifications from my wallet, which also contained one-hundred-ninety-seven dollars cash. I
  - was given an injection of some substance which rendered me unconscious. When I came to, I found that I had been transferred to Beth Israel Medical Center, on the EAst side of downtown Manhattan. There I was given my wallet, (sans identification photographe), and twelve dollars cash. Despite having a receipt from Queens Hospital Center fro one-hundred-ninety-seven dollars, I have been unable to recover the balance of one-hundred-sighty-five dollars, to this day.

New York City Department of Environmental Protection

18- A- 8-

SECOND AMENDED COMPSAINT

II. Statement of Claim (cont'd).

 $\mathcal{G}_{\mathcal{B}^{o}}$ 

- A. New York City Department of Environmental Protection
- B. My work cubicle on the seventh floor.
- C. Between February and March 1999.
- D. I was escorted off the premises and told to take my personal property with by by a security guard armed with a nine millimeter pistol. I was never lawfully terminated from my position of Assistant Community LIason Representative.
- 7. Downstate Correctional Facility. (OM
- A. Downstate Correctional Facility,
- B. D-Block, Cell 17.
- C. November 2012.
- D. Transferred to at 02:00 A.M. (See Article 78).
- 2. Long Island Jewish Hospital.
  - A. Long Island Jewish Hospital.
  - B. Surgical facility.
  - C. March 16, 1995.
  - D. On the above date, my late brother, (David V. Collins), had his thyroid glands removed, irrecovably comprising his immune system. Also when the LIthium he was being given at Zucker Hillside Hospital, (a subsidiary of Long Island Jewish Hospital), caused him to become non-responsive, he was taken by ambulance to this hospital, (Long Island Jewish), on July 24, 2011.
- C. Zucker Hillside Hospital.
  - A. Zucker Hillside Hospital.
  - B. Psychiatric ward.
  - C. July 26, 19/94-July 24, 2011.
  - D. My late brother, (David V. Collins), was diagnosed as being 'bipolar'. He was treated with Lithium, an experimental drug, with repsect to its being used as a treatment for individuals who have deemed 'bipolar'. The side-effects of that drug treatment, ultimately resulted in him becoming non-responsive to verbal efforts to communicate with him, made by my Aunt, (Ms. Evelyn L. Fray), on July 24, 2011.

Case 7:15-cv-00103-KMK Document 11 Filed 04/09/15 Page 17 of 24 TI, STATEMENT OF CLASS FULLY (CONTACT) RETURN SADIORN SATIPROH DINHRUST & AFEDSHILD HOSPITAL MEDICAL CENTER B. SONE WARD FOR THE TERMINALLY IZZ SIOS ES EJENDIN OT SIOS, PS EJENOTOO, J D. My BROTHER'S, MARIO V. COEZINGS), SUP-ESED TREATHEUT FOR CANCER, FAILED TO EBERENC LAR GRENSE EBON NEWSTRELD TO HIS GIBNERS, THE FAILURE OF WHICH OBGANIS BELLO JUBAT KLAS LYSTED AZ TOB CASSE OF KILS DEXTH,

-Q-10-

IV. Exhaustion of Remedies (cont.d) SECOND ANEMED COMPSAULT

F. If you did file a grievance about the events described in this complaint, where did you file the grievance?

Greenhaven Correctional FAcility.

1. Which claim in this complaint did you grieve?

Claim Two.

2. What was the result, if any,

Allegations of defendent were affirmed.

3. What steps, if any, did you take to appeal the decision? Describe all efforts to appeal to the highest plevel of the grievance process.

Appealed to Superintendent, Greenhaven Correctional Facility, (then), William Lee. Appealed to Central Office Review Committee. Filed an Article 78. As currently appealing the Article 78's affirmation.

G. If you did not file a grievance, did you inform any official of your claims?

Not applicable.

H. Please set forth any additional information that is relevant to the elxhaustion of your administrative remedies.

None.

V. RELief: State what you want the court to do for you.

I want the frivolous and spurious allegations of my infractions expunsed from my institutional records, and the respective hearing officers' findings reversed. I would like to be financially compensated for the items stolen from me by Clorrection Officer Stevens. (See Article 78). I would also like to be financially compensated for the time I was confined in the Psychiatric Service Unit located in Greenhaven's Building Two. (for the times I spent there between the months of September 2012 and January 2012), and for the time I spent in Downstate's D-Block in November 2012. I would also greatly appreciate being compensated for the pain, suffering, degradation, and mental anguish I experienced in the above-mentioned facilities. would like to be given back the one-hundred-eighty-five dollars that disappeared when I was confined in Queens Hospital Center and Beth Israel Medical Center in March and April of 1999. I would like to be compensated for my wrongful dismissal by the New York City Department of Environmental Protection, in

Case 7:15-cv-00103-KMK Document 11 Filed 04/09/15 Page 19 of 24 SECOND AMENDED COMPRAINT I BEZLET (CONT'D), JEBBONDA OB WARCH OF 1666 EINJEST, MILLIA BE-I MENEZ NOUBRINT BUT EINEAUSTER OT TUEGO MERMON SON OT GRUNT THE OUND PLESSYM SONG OSCON PRITOPIO TO WING CHESTRATED DEATH OF MY BROTHER, THE SATE DAVIO V. COSSINS

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II. Statement of Claim (cont'd). SECOND AMENDED COMPENING

gaining employment as an Apprentice Sheet Metal Mechanic at New York Sheet Metal Works Incorporated in Brooklyn, New York.

#### III. Injuries

Downstate Correctional Facility, (December, 2001). Lacerations on face. Abrasions tended to and photographed by Downstate Correctional Facility nurse. Greenhaven Correctional Facility (November, 2012). Trauma induced by conditions in Grenhaven Correctional Facility's Psychiatric Service Unit in Building Two, and methods in which I was dealt with by Psychiatrists, Psychologists, and Social Workers in Downstate Correctional Facility's D-Block.

IV. Exhaustion of Administrative Remedies.

A. Did your claims arise while you were confined in jail, prison or other correctional facility?

Yes and no.

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your cliams.

Greenhave Correctional Facility and Downstate Correctional Facility.

B. Does the jail, prison, or other correctional facility where your claims arose have a grievance procedure?

Yes.

C. Does the grievance procedure at the jail, prison or toher cocorrect ional facility where your claims arose cover some or all of your claims?

Yes.

D. Does the grievance procedure at the jail, prison or other correctional facility where your claims arose <u>not</u> cover some of your claims?

Yes.

E. Did you file a grievance in the jail, prison, or other correctional facilitywhere your claims arise?

Yes.

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Previous Lawsuits (cont'd). SECOND ANEXINED COMPLAINET

G. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

An Article 78 Appeal and a 440.10 Motion.

Article 78 Appeal

- Same parties as Article 78.
- APPELLATE DIVISION, SUPREME COURT. Second Judicial Department State of New York 45 Monroe Place Brooklyn, New York 11201.
- Appellate Division Docket #:

2014-01642.

- Judge
- Clerk of Court: Ms. Aprilanne Agostino.
- 5. January, 2014.
- Case still pending.

440.10 Motion

Plaintiff: Robert A. Collins.

Defendents People of the State of New York

- 2. Supreme Court of the State of New York, County of Queens.
- 3. Ind/SCI: 1369/99 and 1460-99 NYSID#: 3118190P.
- The Romorable Richard L. Buchter.
- 5. October, 2014.

, 2105, S NOTION GENNED MARCH & ON THE Signed this Zeh day of E 2015. I declare under penalty

of perjury that the foregoing is true and correct.

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THINSTHED CORONALITY OF TOBSER HITIM

L WAS ABBESTED FOR THE CRIVES FOR WHICH I AM NOW WEARSERATED THE DAY ATTER MY FORTY-SEVENTH BIBTHISAY, ON APRIL 27 1999, THE DATES OF MY SOMPENINCES AGNINGE THE CITY OF MENU PORK, (THE NEW PORK POSICE DEPARTMENT, 3AI, THE ENTERGENCY MEDICAL SERVICE 3AII. THE 113TH PRECINCT, AND 3B, THE DEPARTMENT OF EMVIROUMENTAS PROTECTION LASS OCCURRED A-I SALOT GAIT BAIT FA. STACI TANT CONCOP CHARLEY YN OT LABTTYN BLEYT CLENOITHEM COUNTESTINGENT BENESS ESB 1 5324500 LA LEBSTEAN BEST TESSEN TBORDS, OT GSOT RAW. THEY WEBE IRBEZEVALUT. BETWEEL MY 1999 ABBEST FOR THESE CHARGES GOLOSSET TEAS YN ROF 350RAS DUNSELLUF BY ONA OFFERIOS, MORE THAN SEVENTEEN PEARS ELAPSED WITHIN THAT TIME FRANT I HAD NOWEDOWS, 500BL LGOT THE JOB AT THE DEPARTHENT OF ELLYIBON--NOS ERON BUT EX 955 SITUM MOITSBTORY SATURIA. I JURDODA SMINNAT YETHS-ATACRATA TO THISMOR OUA, SAMOTADON FIT FOR ABPOLLOPE IN GESSSORNE STING SEAGONNIONS POT RESINFAS SANONTASGOS azulli zazn sport fu terit th. Editionalli.Cl. 136 REP. T. D. WILL & GELLA LOCK TOOK A COBO (1997), I mas inigen so the City As Au Assistant COMMUNITY ENSES BESELVE TO SECURE SAMINIAD BY 3250 MIGOT CAN LINOITISE SHIT.

Case 7:15-cv-00103-KMK Document 11 Filed 04/09/15 Page 23 of 24 SECOND AMENDED COMPENICT EXCERCIONAL PROPRIETATION WITH WHICH I ROSTI ESTRAMONED. CIETARISORADIN MEER BURY LEGATT BAT EVILLY MENON BERIOD BETWEELL 1996 ALOS MID-1998 WHELL JaivED AT AM ADOST CARE FACILITY IN CAMPSIE BROBERY NEW YORD, I HAVE BESIDED AT MY FAM. Lari Formarda 2 avive ( KSPI-HOF) (1909 Wall , SPPI MI MEN COND ZEPI M CESCOPAR RESULT MENTY LIGHOUN MEED DINVENT YN 20 JONE ENT, WOND I HAD TO HAVE BEEN COMMUNICATED TO THAT NEIGH-OBLANDED I STEVENT, THE MOSTER EGOONEROR MY FAMILY RESIDENCE FOR BOTH PAROLES, THE MO-JENOH JUT EX LUSSIN EX, EPRIPA CINA GOTE RUORZIM SAITIM SM M CBONBABTBAIT TANT RYDIRAYIMI 3xT MORT M3TL, BVJUSS 2 SSA, JUNASPINOS CONFOCKHEIZH TANTUN BOLGO BATTANT, TOAT GROSSA A CONT THAT WISH? IN BEGINGS TO DEFEROPERTY FINE AND SIR, MY BEASONSFOR MICESPINO THEY HE MY COMPRAINT YN 70 3ANS EUN YOOTLUS ANN YZHT TANT BPBILD BROTHER, THE ZATE DAVID VI COZZINIS, IN AM DILE SUT OUN, EPPI MEEDWIED EMIT FO MAR MEDICAD 1858 EZELMENON DEMINE ON MOREHUSEB 834 CZSSSAJOS SKT TANT MOTENSTIMOS YN LITZISIOS TREATURENT HE RECEIVED AT THOSE HOSPITAZY, NETESTICION TO BRUSS SAT BRISH

-10-

GREEN HAVEN CORRECTIONAL FACILITY

NEW YORK STAT

STORMVILLE, NEW YORK 12582-4000

NAME: PARSART A, CURRINIVEDIN: OVAGSOC

SONTHER DATAIN, ARON MENN CONTENSION SONTHER DISTRICT OF WENT CONTENSION NOT THE PARTY OF MENN CONTENSION OF

SUNY